



PRACTICE TRENDS

Corporate Chiropractic (Pt. 2): The Dark Side

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In a previous *DC* article ([May issue](#)), I tried to make the case that the trend of corporations and franchises delivering chiropractic care might actually be positive. Graduates from our chiropractic colleges could have more employment opportunities, other than starting practices from "scratch." DCs who don't want to be business owners, or even manage a small business, could practice with less administrative stress and with a guaranteed income. This would help the scheduling and repayment of student loan debt.

Employment under this model also could have the benefits of health insurance, paid vacations and other "perks." Granted, there are firms that pay little, and have an oppressive culture. But there are also corporations that fairly pay their doctors, reward their efforts with bonuses, and listen to provider feedback.

With all that said, there is also the "dark side" of the corporate/franchise world that is now controlling medicine. Eventually, this trend will challenge the practice of chiropractic, which is new to this arena.

The Disadvantages of a Corporate Model of Chiropractic Practice

Many seasoned, private-practice DCs have a gut-level distrust of the trend, finding it onerous, perhaps cheapening the profession with a "fast-food" image. They rightfully point out that health care franchises often homogenize the delivery of care and leave little room for innovation or individualized treatment plans.

Some critics point out that corporate medicine's core business is really not health care, but instead the "patient satisfaction" business. The CEO of one of the nation's largest massage franchises reportedly said that his company was not in the massage business at all, but instead, was in the "membership business." That's because clients were urged to get frequent, lower-cost massages by paying a

monthly, prepaid membership fee.



When a DC considers working for a corporation, there are many factors to consider besides salary. For instance, you cannot take time off whenever you feel like it. Your contract will have specific dates for vacation time, and exact hours you are expected to be in the office, including when and how long your breaks and lunch time will be.

Since you will not be hiring your support staff or receptionist, you must accept whoever that is, even though they might be lazy, incompetent or smell bad. A bad relationship with the staff behind the front desk could cause one to dread going into the office.

Corporate Power or Big Brother?

The corporation will be watching you. Patients will be surveyed on their satisfaction with your treatment. Also, any complaints will be investigated, and you will be guilty until proven innocent. If you are a male DC and an overly anxious young woman patient thinks you touched her wrong, pray for justice from the powers-that-be, since there is no guarantee you will get it.

In case justice does not prevail and you are fired, what would that look like? In one case with which I am familiar, a supervisor came into the chiropractor's room with a trash bag. She then swept all the family pictures and personal items off his desk and into the bag, and asked for the doctor's ID badge. She said she could not further discuss any specifics of the termination. An armed security guard ushered the doctor and his bag out of the office, and all the way to his car. That was it.

What About Part Time?

What about working part time? You have your private practice, but work some hours at the hospital clinic or occupational injury clinic. In my conversations with colleagues, working as an independent chiropractic contractor seems to be more common than working as a full-time employee.

I know something about this. For several years, I worked one-and-a-half days per week in the clinic of a large HMO, and three days a week in my own practice. But even as an independent contractor, I had plenty of hoops to jump through. I had to prove by blood work that I had immunity to childhood diseases like measles. I had to have yearly TB testing and flu shots. My property and casualty insurance had to include the HMO clinic. I was expected to attend monthly staff meetings, which interrupted patient treatment time and accomplished little. My daily notes were randomly examined for quality measures.

Your Patients - or Theirs?

But of all the factors inherent in working in a corporate environment, the most sobering to me was the realization that despite developing a relationship of trust with many patients over the years, these were not "my" patients. They belonged to the corporation. The patients were coming to the clinic because their employer chose the HMO as their health insurer. Most of the patients themselves did not make the choice.

These are some of the realities of practicing in a corporate arena. It may be trite to say it's not for everyone, but it really isn't. I've heard it said that if mama's not happy, no one's going to be happy. But if the *corporation* is not happy, you might find yourself being escorted to your car with a bag in your hand.

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